Desc Main Case 19-32253 Doc 28 Filed 01/23/20

| Fureted 01/2 | 3/20 08:30:36 | Desc iv |
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| 2000 1 of 16 | | |

| Official Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where hink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 1724 E 54th St Unit E Street address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | | | | Doc | cumen | t Page 1 of 16 | | | 1/23/20 8:29 |
|---|----------------|--|------------------|--------------------|------------|----------------------|--|---------------------|------------|------------------------|
| Debtor 2 Seyous, if firing) First Name Middle Name Last Name | Fill in thi | is information | to identify | your case and th | is filing | g: | | | | |
| Debtor 2 Fint Name Last Name Last Name Unlited States Bankruptcy Court for the: MGRTHERN DISTRICT OF ILLINOIS Describe 19-32253 Check if this amended filiar | Debtor 1 | | | | | | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number 19-32253 | Debtor 2 | First I | Name | Middle | Name | | Last Name | | | |
| Case number 19-32253 Check if this amended filir Difficial Form 106A/B Schedule A/B: Property 12/15 12/16 12/ | | Filing) First I | Name | Middle | Name | | Last Name | | | |
| Difficial Form 106A/B Schedule A/B: Property 12/15 12/16 | United St | tates Bankruptc | y Court for | the: NORTHER | N DIST | RICT OF | ILLINOIS | | | |
| Difficial Form 106A/B Schedule A/B: Property 12/15 12/16 | Case nur | mber 19-322 | 53 | | | | | | _ | L object with a second |
| reach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where hink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normation. If more space is in needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), inswer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in | | 10 022 | | | | | | | _ | amended filing |
| Another every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply 1724 E 54th St Unit E Street address, if available, or other description City State ZIP Code Who has an interest in the property Investment property Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only Check iff this is community property Check if this is community property (see instructions) | Sche | edule A | B: Pr | scribe items. List | | | | | | e category where you |
| ## What is the property? Check all that apply 1724 E 54th St | Part 1: Do you | Oescribe Each Re own or have any Go to Part 2. | r legal or equ | | | | | | | |
| Chicago IL 60615-0000 City State ZIP Code Investment property Investment property Timeshare Other Other Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Current value of the entire property? Current value of the entire property? portion you own? \$343,000.00 \$343,000 \$34 | 172 Uni | it E | | | _ | Single-fa | amily home | the amount of any s | secured cl | laims on Schedule D: |
| Chicago IL 60615-0000 City State ZIP Code Investment property Timeshare Other Other Primary Residence Who has an interest in the property? Check one Debtor 1 only County County Current value of the entire property? S343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 \$343,000.00 County Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | Stree | et address, if available | e, or other desc | ription | _ | Condom | inium or cooperative | Creditors who have | ; Claillis | зесигей бу гторену. |
| Cook County Describe the nature of your ownership interest in the property? Check one Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | | icago | | | = | Land | | entire property? | ŗ | • |
| Cook Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | City | | State | ZIP Code | _ | Timesha | re | Describe the natur | re of you | r ownership interest |
| County Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | | | | | Who | | • • • | | wn. | |
| At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: | Cod | ok | | | | Debtor 2 | only | | | |
| 20-12-112-035-0000 | Coun | ity | | | ☐ Other | At least or informat | one of the debtors and another ion you wish to add about this iten | (see instructions) | | unity property |
| 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | | | | | | | | Г | | |

pages you have attached for Part 1. Write that number here......

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Entered 01/23/20 08:30:36 Case 19-32253 Doc 28 Filed 01/23/20 Desc Main Document Page 2 of 16 1/23/20 8:29AM Debtor 1 Carmen J. Gonzalez Case number (if known) 19-32253 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Jeep Make: Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put **Grand Cherokee** the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Limited 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: lacksquare At least one of the debtors and another \$16,750.00 \$16,750.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$16,750.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Household Goods & Furniture** \$1,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$650.00 TV & Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

\$500.00

Heirloom Collections

Entered 01/23/20 08:30:36 Case 19-32253 Doc 28 Filed 01/23/20 Desc Main Page 3 of 16 1/23/20 8:29AM Document Debtor 1 Carmen J. Gonzalez Case number (if known) 19-32253 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$400.00 **Normal Clothes** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$500.00 Heirloom Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$100.00 Service Dog & Cat 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,150.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

Checking/Savings

Account

■ No

☐ Yes...... Institution or issuer name:

17.1.

■ Yes.....

Institution name:

Chase Bank

\$1,350.00

Case 19-32253 Doc 28 Filed 01/23/20 Entered 01/23/20 08:30:36 Desc Main 1/23/20 8:29AM Document Page 4 of 16 Carmen J. Gonzalez Case number (if known) 19-32253 Debtor 1 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

Money or property owed to you?

No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

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37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

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53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

63. Total of all property on Schedule A/B. Add line 55 + line 62

Debtor 1

☐ Yes. Give specific information.......

Carmen J. Gonzalez

54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

| 5. Part 1: Total real estate, line 2 | | | \$343,000.00 |
|--|-----------|----|--------------|
| 6. Part 2: Total vehicles, line 5 | \$16,750. | 00 | |
| 7. Part 3: Total personal and household items, line 15 | \$3,150. | 00 | |
| 8. Part 4: Total financial assets, line 36 | \$16,350. | 00 | |
| 9. Part 5: Total business-related property, line 45 | \$0. | 00 | |
| 0. Part 6: Total farm- and fishing-related property, line 52 | \$0. | 00 | |
| 1. Part 7: Total other property not listed, line 54 | + \$0. | 00 | |

page 6 Official Form 106A/B Schedule A/B: Property

1/23/20 8:29AM

\$379,250.00

Case number (if known) 19-32253

| | | Document Pag | 6 / OLT | .0 | | 1/25/20 0.29AW |
|--|--|---|----------------|--------------------------|----------------------|-----------------------------|
| Fill in this information to identi | ify your case: | | | | | |
| Debtor 1 Carmen J. | Gonzalez | | | | | |
| First Name | | le Name Last Nar | ne | | | |
| Debtor 2 | B At a last | II- Name | | | | |
| (Spouse if, filing) First Name | IVIIdo | le Name Last Nar | ne | | | |
| United States Bankruptcy Court f | for the: NORTH | ERN DISTRICT OF ILLINOIS | | | | |
| Case number 19-32253 | | | | | = 0 | |
| (a. a.c.m.) | | | | | | if this is an led filing |
| Official Form 106E/F | | | | | | |
| Schedule E/F: Credite | ors Who Ha | ve Unsecured Claim | าร | | | 12/15 |
| Schedule G: Executory Contracts at Schedule D: Creditors Who Have Cl eft. Attach the Continuation Page to ame and case number (if known). | aims Secured by Pro this page. If you ha | perty. If more space is needed, c ve no information to report in a P | opy the Par | t you need, fill it out, | number the entries i | n the boxes on the |
| Part 1: List All of Your PRIO | | | | | | |
| Do any creditors have priority | unsecured claims ag | ainst you? | | | | |
| ☐ No. Go to Part 2. | | | | | | |
| Yes. | | | | | | |
| possible, list the claims in alphab | a claim has both prior etical order according | or has more than one priority unsect ity and nonpriority amounts, list that to the creditor's name. If you have n, list the other creditors in Part 3. | claim here a | and show both priority a | nd nonpriority amoun | ts. As much as |
| (For an explanation of each type | of claim, see the instru | uctions for this form in the instructio | n booklet.) | | | |
| | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 Illinois Dept. of Reve | enue | Last 4 digits of account numbe | r | \$200.00 | \$200.00 | \$0.00 |
| Priority Creditor's Name | | | 0010 | | | |
| Bankruptcy Unit P.O. Box 19035 | | When was the debt incurred? | 2018 | | - | |
| Springfield, IL 62794 | -9035 | | | | | |
| Number Street City State Zip | | As of the date you file, the claim | n is: Check a | all that apply | | |
| Who incurred the debt? Chec | k one. | ☐ Contingent | | | | |
| ■ Debtor 1 only | | ☐ Unliquidated | | | | |
| Debtor 2 only | | ☐ Disputed | | | | |
| Debtor 1 and Debtor 2 only | | Type of PRIORITY unsecured c | laim: | | | |
| ☐ At least one of the debtors a | and another | ☐ Domestic support obligations | | | | |
| ☐ Check if this claim is for a | community debt | ■ Taxes and certain other debts | you owe the | e government | | |
| Is the claim subject to offset? | • | ☐ Claims for death or personal in | njury while yo | ou were intoxicated | | |
| ■ No | | ☐ Other. Specify | | | | |
| ☐ Yes | | | | | | |

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|----------------|----------|----------|------|-------|
| Λf | 16 | | | |

1/23/20 8:29AM Debtor 1 Carmen J. Gonzalez Case number (if known) 19-32253 2.2 IRS Last 4 digits of account number \$1,300.00 \$1,300.00 \$0.00 Priority Creditor's Name **Internal Revenue Service** When was the debt incurred? 2018 P.O. Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ■ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? No Other. Specify ☐ Yes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of **Total claim** 4.1 **Bank of America** Last 4 digits of account number 6464 \$4,467.14 Nonpriority Creditor's Name Opened 01/06 Last Active **Bankruptcy Department** PO Box 982284 When was the debt incurred? 9/24/15 El Paso, TX 79998-2238 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

■ Other. Specify Purchases

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

■ No

☐ Yes

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Case number (if known)

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19-32253

| 1.2 | Chase Card | Last 4 digits of account number | 4399 | \$0.00 |
|-----|---|--|--|------------|
| | Nonpriority Creditor's Name P.o. Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 09/06 Last Active 2/23/15 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separal report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | plans, and other similar debts | |
| | Yes | Other. Specify Purchases | | |
| 4.3 | Citi | Last 4 digits of account number | 5260 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 6241 | When was the debt incurred? | | |
| | Sioux Falls, SD 57717 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separe report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| 1.4 | City of Chicago Parking Nonpriority Creditor's Name | Last 4 digits of account number | | \$1,813.48 |
| | Department of Finance P. O. Box 6330 | When was the debt incurred? | | |
| | Chicago, IL 60680 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separ | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □Yes | Other. Specify Tickets | | |

Debtor 1 Carmen J. Gonzalez

1/23/20 8:29AM

Case number (if known)

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Desc Main 1/23/20 8:29AM

19-32253

4.5 Comcast Last 4 digits of account number 0402 \$0.00 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? **Opened 09/16** 11621 E. Marginal Way 5 Tukwila, WA 98168-1965 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes **Deutsche Bank National Trust** 6287 \$0.00 4.6 Last 4 digits of account number Compan Nonpriority Creditor's Name When was the debt incurred? america's Servicing Company 3476 Stateview Blvd Des Moines, IA 50328 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify NOTICE ONLY ☐ Yes 4.7 Jefferson Capital Last 4 digits of account number \$295.26 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 7999 Saint Cloud, MN 56302-9617 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Debtor 1 Carmen J. Gonzalez

1/23/20 8:29AM

| Debio | Carmen J. Gonzalez | | Case Humber (II known) | |
|--------|---|--|--|-------------------|
| 4.8 | Midland Funding, LLC | Last 4 digits of account nu | mber | \$957.97 |
| | Nonpriority Creditor's Name | | | |
| | Bankruptcy Department 2365 Northside Drive, Suite 300 | When was the debt incurre | d? | |
| | San Diego, CA 92108 | | | |
| | Number Street City State Zip Code | As of the date you file, the | claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY uns | secured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of report as priority claims | a separation agreement or divorce that you did not | |
| | No | <u>-</u> ' ' ' | s-sharing plans, and other similar debts | |
| | ☐ Yes | | | |
| | Li Tes | Other. Specify | | |
| Part 3 | List Others to Be Notified About a D | ebt That You Already Listed | | |
| | | • | t that you already listed in Parts 1 or 2. For example, if a c | collection agency |
| is try | ing to collect from you for a debt you owe to | someone else, list the original cre- | ditor in Parts 1 or 2, then list the collection agency here. S | Similarly, if you |
| | more than one creditor for any of the debts the debts to defen any debts in Parts 1 or 2, do not fill out | | e additional creditors here. If you do not have additional | persons to be |
| | and Address | On which entry in Part 1 or Part 2 | did you list the original creditor? | |
| Citi | and Address | Line 4.3 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims | |
| _ | ox 6500 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Sioux | c Falls, SD 57117-6500 | Last 4 digits of account number | | |
| Name | and Address | On which entry in Part 1 or Part 2 | did you list the original creditor? | |
| | ank NA | Line 4.3 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| РО В | ox 769006 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| San A | Antonio, TX 78245 | Last 4 digits of account number | . a.t. 2. oroanoro mini riscipiioni, oriccoaroa oranio | |
| | | Last 4 digits of account number | | |
| | and Address of Chicago Dept. of Revenue | On which entry in Part 1 or Part 2 | · _ | |
| | era Enforcement Violation | Line 4.4 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | |
| | ox 88292 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Chica | ago, IL 60680-1292 | | | |
| | | Last 4 digits of account number | | |
| | and Address | On which entry in Part 1 or Part 2 | did you list the original creditor? | |
| | ergent Outsourcing | Line 4.5 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| | Sw 39th St on, WA 98057 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Kent | 511, WA 30037 | Last 4 digits of account number | | |
| Name | and Address | On which entry in Part 1 or Part 2 | did you list the original creditor? | |
| | s & Harris, Ltd | Line 4.4 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims | |
| | Vest Jackson Blvd | | Part 2: Creditors with Nonpriority Unsecured Claims | |
| Suite | | | — Fart 2. Greditors with Northholity Offsecured Claims | |
| Chica | ago, IL 60604 | Last 4 digits of account number | | |
| | | Last 4 digits of account number | | |
| | and Address | On which entry in Part 1 or Part 2 | · · · <u> </u> | |
| | ner, Beyers & Mihlar, LLC neys at Law | Line 4.6 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | |
| | : Main St., Suite 200 | | Part 2: Creditors with Nonpriority Unsecured Claims | |
| | tur, IL 62523 | | | |
| | | Last 4 digits of account number | | |
| | and Address | On which entry in Part 1 or Part 2 | did you list the original creditor? | |
| | oarger Goggan Blair & | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| Samp | | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Attor | neys at Law | | | |

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| Debtor 1 Carmen J. Gonzalez | Case number (if known) 19-32253 |
|---|--|
| PO Box 06152 Chicago, IL 60606-0152 | Last 4 digits of account number |
| Name and Address McCalla Raymer, Leibert Pierce,LLC Bankruptcy Deparment 1 N Dearborn St., Suite 1200 Chicago, IL 60602 | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.3 of (Check one): |
| • , | Last 4 digits of account number |
| Name and Address Secretary of State Attn: Bankruptcy Department PO Box 7848 Modison, WI 52707 | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Madison, WI 53707 | Last 4 digits of account number |
| Name and Address Secretary of State License Renewal 3701 Winchester Road Springfield, IL 62707-9700 | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): |
| | Last 4 digits of account number |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 1,500.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 1,500.00 |
| | | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | 0 | • | 0.00 |
| | Ch | you did not report as priority claims | 6g. | \$ | |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 7,533.85 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 7,533.85 |

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| Fill | in this information to | o identify your ca | ase: | | | | | | | |
|--------------|---|------------------------------|---|----------------|----|-----|---------------------|-------------|----------------------------------|------|
| De | btor 1 | Carmen J. G | onzalez | | | _ | | | | |
| | btor 2 buse, if filing) | | | | | _ | | | | |
| Un | ited States Bankrupt | tcy Court for the | NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | |
| Ca | se number 19- | 32253 | | | | C | Check if this is | : | | |
| (If k | nown) | | | | | | An amende | ed filing | | |
| | | | | | | | A supplem 13 income | | g postpetition ollowing date: | |
| <u>O</u> | fficial Form | <u> 1061</u> | | | | | MM / DD/ \ | YYYY | | |
| S | chedule I: ` | Your Inco | ome | | | | | | | 12/1 |
| atta | ch a separate shee | | r spouse is not filing wi On the top of any additi | | | | | | | |
| 1. | Fill in your emploinformation. | oyment | | Debtor 1 | | | Debtor 2 | 2 or non-fi | ling spouse | |
| | If you have more t | | Employment status | ☐ Employed | | | ☐ Empl | oyed | | |
| | attach a separate information about employers. | | . , | ■ Not employed | | | ☐ Not e | mployed | | |
| | lactude new time | acceptal or | Occupation | Consultant | | | | | | |
| | Include part-time, self-employed wor | | Employer's name | | | | | | | |
| | Occupation may in or homemaker, if i | | Employer's address | | | | | | | |
| | | | How long employed to | here? | | | | | | |
| Pa | rt 2: Give Det | ails About Mor | thly Income | | | | | | | |
| spo If yo | use unless you are s ou or your non-filing s | separated. spouse have mo | ore than one employer, co | , c | • | | | | , | Ū |
| nor | e space, attach a se | eparate sheet to | this form. | | | For | Debtor 1 | | otor 2 or ng spouse | |
| 2. | | | ry, and commissions (becalculate what the month) | | 2. | \$ | 0.00 | \$ | N/A | |
| 3. | Estimate and list | monthly overti | me pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross I | Income. Add lin | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | N/A | |

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monthly income

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Debtor 1 Carmen J. Gonzalez Case number (if known) 19-32253 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 0.00 \$ N/A List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 0.00 N/A 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ N/A Voluntary contributions for retirement plans 5c. 5c. \$ 0.00 N/A 5d. Required repayments of retirement fund loans 5d. 0.00 N/A 5e. Insurance 5e. 0.00 N/A 5f. **Domestic support obligations** 5f. 0.00 N/A 5g. 5g. **Union dues** \$ \$ 0.00 N/A 5h. Other deductions. Specify: 5h.+ \$ 0.00 N/A Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$ 0.00 \$ N/A List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 N/A 8h Interest and dividends 8b. \$ 0.00 \$ N/A Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 N/A 8d. **Unemployment compensation** 8d. 1,386.00 N/A 8e. **Social Security** 8e. 783.00 N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: Link Card 165.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A Other monthly income. Specify: 8h. 8h.+ \$ 0.00 \$ N/A Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 2.334.00 \$ N/A 10. \$ \$ 10. Calculate monthly income. Add line 7 + line 9. 2,334.00 \$ 2,334.00 N/A Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2,334.00 12. applies Combined

13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

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| Fill- | in this informa | ation to identify yo | our case: | | | | | | |
|---------------------|--|--|--------------------------------------|---|---|------------|------------------|--|-------|
| | | | | | | 0.1 | | | |
| Debt | tor 1 | Carmen J. G | onzalez | | | Ch | eck if this is: | ilina | |
| | | | | | | _ | An amended f | · · | |
| | tor 2 ouse, if filing) | | | | | | | showing postpetition chas of the following date: | apter |
| (Opc | ouse, ii iiiiig) | | | | | | 10 expenses a | as of the following date. | |
| Unite | ed States Bank | ruptcy Court for the | : NORTH | ERN DISTRICT OF ILLING | OIS | | MM / DD / YY | YY | |
| | e number 19 | 9-32253 | | | | | | | |
| (| | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | | 12/15 |
| Be a info nun | as complete ormation. If m nber (if know | and accurate as nore space is ne n). Answer ever | possible eded, atta ry questio | . If two married people are | | | | | |
| Part | Is this a join | ribe Your House nt case? | ehold | | | | | | |
| ٠. | _ | | | | | | | | |
| | ■ No. Go to | o line 2. es Debtor 2 live i | in a conar | ata hausahald? | | | | | |
| | | | iii a sepai | ate nousenolu? | | | | | |
| | | - | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate Housel | hold of De | ebtor 2. | | |
| 2. | Do you hav | e dependents? | ■ No | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent age | 's Does dependen live with you? | t |
| | Do not state | the | | | | | | □ No | • |
| | dependents | names. | | | | | <u> </u> | ☐ Yes | |
| | | | | | | | - | □ No | |
| | | | | | | | | 🗆 Yes | |
| | | | | | | | | ☐ No | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | ☐ No | |
| | | | | | | | | 🗆 Yes | |
| 3. | | penses include | han | No | | | | | |
| | | of people other to d your depende | | Yes | | | | | |
| | | | | | | | | | |
| Part | | nate Your Ongoi | | , , | | | | | |
| exp | | a date after the l | | uptcy filing date unless y y is filed. If this is a supp | | | | | |
| | | | | government assistance if | | | | | |
| | value of suc ficial Form 10 | | d have inc | cluded it on Schedule I: Y | our Income | | Your | expenses | |
| 4. | The rental of | or home owners | hip expen | ses for your residence. In | nclude first mortgage | _ | | | |
| | | nd any rent for th | | - | 3.0 | 4. | \$ | 0.00 | |
| | If not include | ded in line 4: | | | | | | | |
| | | estate taxes | | | | 4a. | · - | 0.00 | |
| | | erty, homeowner's | | | | 4b. | · | 0.00 | |
| | | | | ıpkeep expenses | | 4c. | : | 0.00 | |
| _ | | eowner's associat | | | ma aquitulases | 4d. | · | 0.00 | |
| 5. | Additional i | mortgage paymo | ents for yo | our residence , such as hor | me equity loans | 5. | Ф | 0.00 | |

5. \$

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Debtor 1 Carmen J. Gonzalez 19-32253 Case number (if known) 6a. Electricity, heat, natural gas 6a. \$ 115.00 6b. Water, sewer, garbage collection 6b. \$ 53.00 Telephone, cell phone, Internet, satellite, and cable services 6c. 6c. \$ 141.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 400.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 150.00 Personal care products and services 10. \$ 150.00 Medical and dental expenses 11. \$ 50.00 12. Transportation. Include gas, maintenance, bus or train fare. 150.00 12. \$ Do not include car payments. 13. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 0.00 15a. Life insurance 15a. \$ 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 125.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ Other payments you make to support others who do not live with you. 0.00 Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. \$ 20d. Maintenance, repair, and upkeep expenses 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. +\$ 600.00 21. Other: Specify: Anticipated rent expense 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 1,934.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 1,934.00 Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 2,334.00 23b. Copy your monthly expenses from line 22c above. 23b. 1,934.00 23c. Subtract your monthly expenses from your monthly income. 400.00 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

| ■ No. | |
|--------|---------------|
| ☐ Yes. | Explain here: |